CITY OF COVINGTON, KENTUCKY APPLICATION FOR OCCUPATIONAL LICENSE FINANCE DEPARTMENT 292-2183 0R 292-2184

638 Madison Avenue Covington, KY 41011 Office Hours 8:00 AM – 4:30 PM

Every business or individual subject to the Occupational License Fee is required to complete this application and return it with \$30.00 to the Finance Department. The \$30.00 fee is not required of nonprofit organizations. A permit from the Zoning Department (292-2170) is required of all businesses located in the City of Covington. The following information is necessary for our records.

DATE	BUSINESS NAME
APPLICANT	ADDRESS
ADDRESS	
	PHONE
PHONE	MAILING ADDRESS (if different from above)
Is Business a: Individual	
Partnership (list name & address of each partner on a separate schedule) Corporation (list name & address of each officer and agent for service on a separate schedule)	ACCOUNTING PERIOD: Calendar Year Fiscal Year month day
Other (Describe)	FEDERAL TAX EIN #
NATURE OF BUSINESS	
DATE OPERATION STARTED IN COVINGTON	N//
DO YOU HAVE OR WILL YOU HAVE EMPLO' If so, the City of Covington Payroll tay to be withbut	YEES WORKING IN COVINGTON? YES NO
OTHER INFORMATION	month day year
I hereby certify that all information and statements	are true and correct.
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S	Signature Title
ZONING PERMIT ATTACHED	
ACCOLINT NUMBER	ATE